

EDITORIALS

be of use both in interrupting the acute episode and in longer-term management. It is family therapy.

Very little information about the application of family therapy to anorexia nervosa has yet appeared in print. But those who have watched the work of Minuchin and his group at the University of Pennsylvania are impressed that a major therapeutic innovation is at hand. Not only has the acute phase of the illness been interrupted, but favorable long-term changes in the patients have apparently been achieved by modifying the pathological interactions within these "enmeshed" families. A verbatim account of an initial interview with a family with an anorexic daughter, one of the few published accounts of the method, provides an instructive account of the process and leaves us eager for more traditional forms of scientific reporting.⁶ (ADDENDUM: Such a report has just appeared. See Reference 7.)

Psychopharmacology, behavior modification and family therapy, even in their current underdeveloped states, have already made it possible to

interrupt acute episodes of anorexia nervosa with great predictability. Such a course should be pursued vigorously; there is no longer an excuse for delay in restoring weight to these unhappy patients. And down the road beckons the hope of doing far more than just interrupting acute episodes. We may well be on the threshold of definitive treatment of the disorder.

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A REFRESHER COURSE in cardiac radiology will be held by the North American Society for Cardiac Radiology from March 2 to 6, 1975, in Williamsburg, Virginia. A distinguished faculty will conduct seminars covering the radiology of acquired and congenital heart disease and its clinical implications.

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